



Requirements and Instructions for Receiving A Zero Emission Vehicle Incentive Grant

Pursuant to California Health and Safety Code (H&SC) Sections 44260-44265

Applicant and Vehicle Eligibility Requirements

Applicant and vehicle eligibility requirements are specified in Sections 44260-44265 of the California Health and Safety Code (H&SC) and in the Air Resources Board's (ARB's) program guidelines and are available from the Program Manager (See contact information on Page 2.) or on the Internet at www.arb.ca.gov/msprog/zevprog/zip/zip.htm. The applicant must be an individual, a local government entity or agency, a public agency, a nonprofit organization or a private business. For a leased vehicle, the applicant shall be the individual or entity that is financially responsible for the cost of the registration of the vehicle.

Applicant and vehicle must meet requirements that include, but are not limited to, the following:

1. The applicant is a resident of the State of California or represents an entity that conducts business in the State of California.
2. The applicant has purchased or is leasing a new zero emission vehicle (ZEV) that meets the criteria specified in H&SC Sections 44261 and 44263 and the vehicle is an ARB certified zero emission passenger car or light-duty truck.
3. The purchase or lease of this new ZEV commenced on or after October 1, 2000 and on or before December 31, 2002.
4. This new ZEV is registered with the California Department of Motor Vehicles for use in California.

There are two options for receiving the grant:

1) "Grant Assignment to Lessor"

If you intend to lease the new ZEV, you may consider assigning the grant to a participating lessor. The participating lessor would then receive the entire grant amount directly from the Program Manager. This will allow the lessor to reduce the three-year lease price of the qualifying vehicle by the entire grant amount, giving you lower monthly lease payments. If the lease period is less than 36 months, you or the participating lessor should contact the Program Manager, as the maximum grant for the ZEV may be reduced. This grant may be taxable so please contact your tax professional or the Internal Revenue Service for additional information. If you choose this option, complete and submit, through the participating lessor, the following items to the Program Manager (See contact information on next page.):

- ☐ A completed Application for Zero Emission Vehicle Incentive Grant (Form MSCD/ZEV-02A). If multiple vehicle grants are requested, Form MSCD/ZEV-02B may be completed and attached to Form MSCD/ZEV-02A.
- ☐ A completed Assignment of Zero Emission Vehicle Incentive Grant Form (Form MSCD/ZEV-03)
- ☐ A copy of the lease/purchase agreement signed by all parties with an itemization of credits, discounts, incentives received, if applicable
- ☐ A copy of the current vehicle registration

2) **“Direct Payment”**

With this option, you would receive your grant directly in three equal allotments. The first allotment will be sent out upon approval of your grant application. The second allotment will be sent out at the beginning of the second 12-month period after the purchase or lease of the new ZEV. The third allotment will be sent out at the beginning of the third 12-month period after the purchase or lease of the new ZEV. If you intend to lease a new ZEV and the lease period is less than 36 months, you should contact the Program Manager, as the maximum grant for that ZEV may be reduced. This grant may be taxable so please contact your tax professional or the Internal Revenue Service for additional information. If you choose this option, complete and submit the following items to the Program Manager:

☐ A completed Application for Zero Emission Vehicle Incentive Grant (Form MSCD/ZEV-02A). If multiple vehicle grants are requested, Form MSCD/ZEV-02B may be completed and attached to Form MSCD/ZEV-02A.

☐ A copy of the lease/purchase agreement signed by all parties with an itemization of credits, discounts and incentives received, if applicable

☐ A copy of the current vehicle registration

If you choose the “Direct Payment” option, the Program Manager will send you a letter each year to remind you to submit a request for payment of your ZEV incentive grant that remains available. At that time, you would complete the form provided to you and send it to the Program Manager, along with a copy of the current vehicle registration. If you change addresses during the three-year period after the date of purchase or lease, please provide the Program Manager with your new address as soon as possible. To receive the entire grant amount, you must own the vehicle for a continuous 36 month period after the date of purchase or continue to lease the vehicle for the entire period specified in the your application. If you decide to sell the ZEV or terminate the lease, please contact the Program Manager.

PRIVACY STATEMENT

Section 7(b) of the Privacy Act of 1974 (Public Law 93-5791) requires that any federal, state, or local governmental agency which requests an individual to disclose his/her social security account number shall inform that individual whether that disclosure is mandatory or voluntary, by which statutory or other authority such number is solicited, and what uses will be made of it.

The State of California requires that all parties entering into business transactions that may lead to payments from the State must provide their Taxpayer Identification Number (TIN) as required by the State Revenue and Taxation Code, Section 18646 to facilitate tax compliance enforcement activities and to facilitate the preparation of Form 1099 and other information as required by the Internal Revenue Code, Section 6109(a). The TIN for individual and sole proprietorships is the Social Security Number (SSN).

It is mandatory to furnish the information requested. Federal law requires that payments for which the requested information is not provided be subject to 31% withholding and state law imposes noncompliance penalties of up to \$20,000.

You have the right to access records containing your personal information, such as your SSN. To exercise that right or if you have any questions regarding this Privacy Statement, please contact the Program Manager of the Statewide Zero Emission Vehicle Incentive Grant Program at (866) 808-0189.

◆CONTACT INFORMATION◆

Statewide ZEV Incentive Program
California Air Resources Board, MSCD/ZEV
1001 I Street, Sacramento, CA 95814
P.O. Box 2815, Sacramento, CA 95812

General Information Line: 1-800-END-SMOG

Judy Yee, Program Manager
Telephone: (916) 327-5610
Toll Free Line: (866) 808-0189
FAX: (916) 322-3923
E-Mail: jyee@arb.ca.gov



Application for Zero Emission Vehicle Incentive Grant

Pursuant to California Health and Safety Code (H&SC) Sections 44260-44265

Obtain from ARB
Voucher Number:

Complete and Submit to:
Program Manager, Statewide ZEV Incentive Program,
California Air Resources Board, MSCD/ZEV
P.O. Box 2815, Sacramento, California 95812
Toll Free Line: (866) 808-0189

A. APPLICANT INFORMATION <i>(Please print.)</i>		
Name of Vehicle Owner/Lessee:		PURPOSE: Information contained in this form will be used by the Air Resources Board for determining grant eligibility, processing grant allocations, and to prepare Information Returns (Form 1099). (See Privacy Statement in Requirements and Instructions)
Street Address:		
City:	State:	Zip Code:
Mailing Address:		
Telephone Number:	FAX Number:	E-mail Address (optional):
B. PAYMENT OPTION		
<i>Please check option and initial:</i>		
<input type="checkbox"/> Direct Payment <i>(Initial here: _____)</i>		
<input type="checkbox"/> Grant Assigned to Lessor <i>(Also complete and submit Form MSCD/ZEV-03.) (Initial here: _____)</i>		
<i>Please check one box below, as applicable, and provide the requested information:</i>		
<input type="checkbox"/> Private Individual, Sole Proprietor <input type="checkbox"/> Federal Government Agency <input type="checkbox"/> State Government Agency <input type="checkbox"/> Local Government Agency <input type="checkbox"/> Non-profit Organization <input type="checkbox"/> Corporation <input type="checkbox"/> Partnerships, Estates or Trusts	<u>Social Security Number:</u>	
	OR	
	<u>Federal Employer's Identification Number:</u>	
C. VEHICLE INFORMATION (<input type="checkbox"/> Multiple vehicles-Form MSCD/ZEV-02B is attached. <i>Initial here: _____</i>)		
Date of Purchase or Date on Which Lease Commences:	Lease Term in Months <i>(if applicable)</i> :	
Make, Model and Model Year of ZEV:	Vehicle Identification Number (VIN):	
Manufacturer/Lessor Contact <i>(Please print name and title.)</i> :		Telephone Number:
I hereby certify to the best of my knowledge and belief that the requirements for this grant as specified in H&SC 44260-44265 and the Air Resources Board's (ARB's) program guidelines have been met and that all information provided in this application and supporting attachments are true and correct.		
Name of Applicant, or Authorized Representative and Title <i>(Please print.)</i> :		
Signature:		Date:
FOR ARB USE ONLY:		
Name and Title <i>(Please print.)</i> :	Date:	Approval Number
Signature:	Grant Amount:	Number of Allotments



Assignment of Zero Emission Vehicle Incentive Grant

Pursuant to California Health and Safety Code (H&SC) Sections 44260-44265

Obtain from ARB
Voucher Number:

Complete and Submit with Form MSCD/ZEV-02A to:
Program Manager, Statewide ZEV Incentive Program,
California Air Resources Board, MSCD/ZEV
P.O. Box 2815, Sacramento, California 95812
Toll Free Line: (866) 808-0189

By signing and submitting this form through the lessor or dealer, you, the lessee or the authorized representative of the lessee, are assigning the entire grant amount to the lessor. This will allow the lessor to reduce the price of the qualifying vehicle by the available grant amount, giving you a lower monthly lease cost. This grant may be taxable, so please contact your tax professional or the Internal Revenue Service for additional information.

I, the lessee or authorized representative of the lessee, hereby certify to the best of my knowledge and belief to the following:

1. I am a resident of the State of California or represent an entity conducting business in the State of California.
2. I am leasing a new zero emission vehicle that meets the criteria specified in H&SC Sections 44261 and 44263 and the vehicle is an Air Resources Board certified zero emission passenger car or light-duty truck. The Vehicle Identification Number (VIN) is set forth below.
3. The lease of this new zero-emission vehicle commences on the date set forth below, which is on or after October 1, 2000 and on or before December 31, 2002.
4. This new zero-emission vehicle is or shall be registered with the Department of Motor Vehicles for use in California.
5. I understand that H&SC Sections 44260-44265 provide zero-emission vehicle incentive grants to purchasers or lessees of eligible zero-emission vehicles. I hereby assign my rights to these grants to _____. I understand that, in consideration of this assignment, my vehicle lease cost has been reduced by an amount equal to the amount of the grant assigned to _____ over the lease period of the vehicle.

Name of Lessee, or Authorized Representative and Title (*Please print.*):

Signature:

Date:

☐ Check, if this assignment is for multiple vehicles identified in Form MSCD/ZEV-02B. Initial here:

Make, Model and Model Year of ZEV:

Vehicle Identification Number (VIN):

Date on Which Lease Commences:

Lease Term in Months:

Lessor:

Lessor Address:

City:

State:

Zip Code:

Federal Employer's Identification Number:

I, the lessor agent, hereby certify to the best of my knowledge and belief that the requirements of this grant as specified in H&SC Sections 44260-44265 and the Air Resources Board's program guidelines have been met and that all information provided in this application and supporting attachments are true and correct.

Name of Lessor Agent and Title (*Please print.*):

Telephone Number:

Signature:

Date:

Please Indicate Total Number of Vehicles: _____		
VEHICLE #		
Date of Purchase or Date on Which Lease Commences:	Lease Term in Months (<i>if applicable</i>):	
Make, Model and Model Year of ZEV:	Vehicle Identification Number (VIN):	
Manufacturer/Lessor Contact (<i>Please print name and title.</i>):		Telephone Number:
VEHICLE #		
Date of Purchase or Date on Which Lease Commences:	Lease Term in Months (<i>if applicable</i>):	
Make, Model and Model Year of ZEV:	Vehicle Identification Number (VIN):	
Manufacturer/Lessor Contact (<i>Please print name and title.</i>):		Telephone Number:
VEHICLE #		
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Make, Model and Model Year of ZEV:	Vehicle Identification Number (VIN):	
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Manufacturer/Lessor Contact (<i>Please print name and title.</i>):		Telephone Number:
VEHICLE #		
Date of Purchase or Date on Which Lease Commences:	Lease Term in Months (<i>if applicable</i>):	
Make, Model and Model Year of ZEV:	Vehicle Identification Number (VIN):	
Manufacturer/Lessor Contact (<i>Please print name and title.</i>):		Telephone Number: